



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E284524**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	13-02857
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIBAL RESERVATION							
M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #			
DATE OF COLLISION	11 - 12 - 2013	0720	31		N S E W	IN OF	0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
20TH ST SE	BLOCK NO. <input checked="" type="checkbox"/>	8300
	MILE POST <input type="checkbox"/>	

DISTANCE	MILES	OF (REFERENCE OR CROSS STREET)
		83RD AVE SE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 3606549044
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LAST NAME	WEINERT	FIRST NAME	DEBRA	MIDDLE INITIAL	K
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STREET NEW ADDRESS	711 NORTH CARPENTER RD
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CITY	SNOHOMISH	ST	WA	ZIP	98290
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	WEINEDK445Q5	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	11	25	1956
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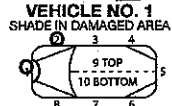
ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ABV3475	STATE	WA	VIN#	1FAHP3FN1AW292636
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2010	MAKE	FORD	MODEL	FOCUS	STYLE	4T	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	PROGRESSIVE 900611356	VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4258709906
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LAST NAME	ROSSART	FIRST NAME	KATHERINE	MIDDLE INITIAL	L
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STREET NEW ADDRESS	1108 89TH AVE SE
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CITY	EVERETT	ST	WA	ZIP	98205
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	ROSSAKL246LS	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	06	10	1976
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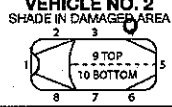
ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ANL2912	STATE	WA	VIN#	2D8GV58285H535021
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2005	MAKE	DODG	MODEL	MAGSW	STYLE		VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	ANGEL TOWING	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	ANDY ROSSART 1108 89TH AVE SE LAKE STEVENS WA 98258	LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	SAFECO H1731342	VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	CHAD CHRISTENSEN	BADGE OR ID #	075	AGENCY	WA0311900
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STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E284524**

CASE # **13-02857**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

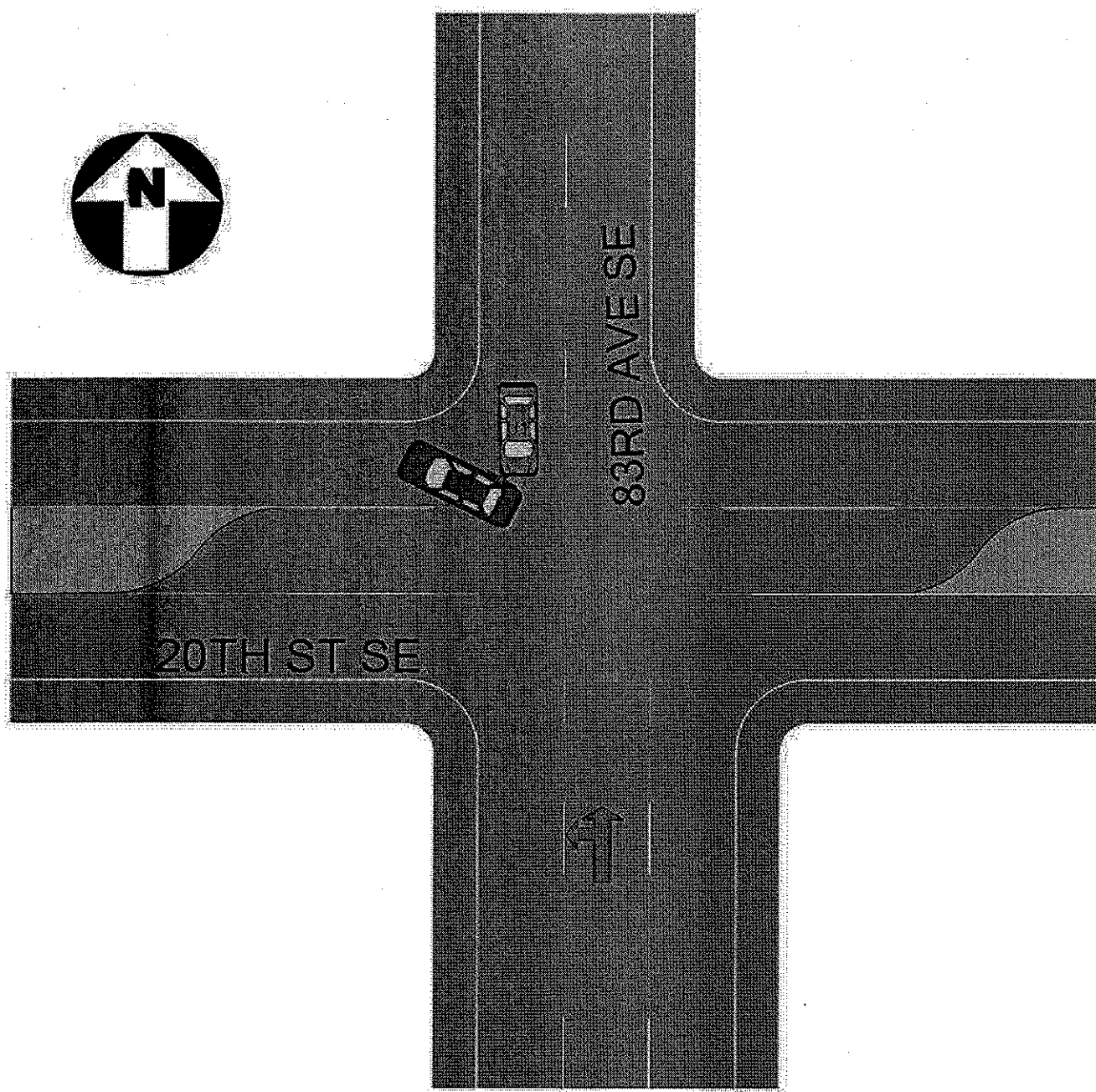
NAME (LAST, FIRST, MIDDLE INITIAL)		<b>MCGLOTHLEN JENNIE R</b>																	
ADDRESS & PHONE #		<b>8924 12TH PL SE LAKE STEVENS WA 98258 4259318595</b>																	
SEX		F		D.O.B.		MMDDYYYY		05		02		1972							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY													
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY													
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

Unit 2 was making a left turn from 83rd Ave SE to head westbound on 20th St SE. Unit 1 was heading southbound on 83rd Ave SE. Driver of Unit 1 said she saw the traffic light turn yellow/red and continued through striking Unit 2 at its rear passenger wheel. Driver of Unit 2 said had changed to yellow as she entered the intersection. Driver of Unit 2 said she saw Unit 1 not stopping and sped up to avoid the collision, but was not quick enough.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

CHAD CHRISTENSEN		11-12-13 03:01 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY		DATE	
ROBERT MINER 095		11/13/2013 12:16:25 AM	
BADGE OR ID #	ORI #	TIME POLICE DISPATCHED	TIME POLICE ARRIVED
075	WA0311900	7:20 AM	7:24 AM



# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02057

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Debra Kay Weinert	RACE W	ETH	SEX F	DOB 11/25/56	AGE 56	HGT 5'6"	WEIGHT 120 lbs	HAIR Brown	EYES Blue
STREET ADDRESS 1040 25th Ave NE Marysville		CITY Marysville		STATE WA		ZIP 98271		RES. STATUS		
HOME PHONE 360-654-9044		CELL PHONE 360-220-2971		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS								

I, Debbie Weinert, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Going through light on 93rd ~~and take~~  
~~back to school as I was going through~~  
light when I was struck on the right  
side of the car

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Debra Weinert</u>	DATE SIGNED 11-11-2017	LOCATION SIGNED 83rd 204th
OFFICER/NUMBER: <u>[Signature]</u> #75	DATE SIGNED 11/12/13	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02857



### VICTIM / WITNESS

NON-DISC	NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
	McGlothlen, Jennie R	W		F	5-2-72	41	5'11"	180	Brown	Blue
STREET ADDRESS		CITY		STATE		ZIP		RES. STATUS		
8924 12th PL SE		Lake Stevens		WA		98258				
HOME PHONE		CELL PHONE		PLACE OF EMPLOYMENT						
		425-931-8595		home maker						
WORK PHONE		EMAIL ADDRESS								
		JmRm13@msn.com								

I, Jennie McGlothlen, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Heading north bound on 83rd, at the 20th St. light, a blue Dodge was in front of me turning left to head west on 20th. After the light ~~was~~ changed yellow, she made her left turn. A ford heading south on 83rd also was trying to make the light as it turned yellow. The ford hit the back, right of the Dodge.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:	DATE SIGNED	LOCATION SIGNED
Jennie McGlothlen	11-12-13	
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED
C. Christ	11/12/13	

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# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02857

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>Rossart, Kate</u>	RACE <u>W</u>	ETH <u></u>	SEX <u>F</u>	DOB <u>6/10/76</u>	AGE <u>37</u>	HGT <u>5'9"</u>	WEIGHT <u>130</u>	HAIR <u>B</u>	EYES <u>B</u>
STREET ADDRESS <u>1108 89th AVE SE</u>		CITY <u>Lake Stevens</u>		STATE <u>Wa</u>		ZIP <u>98258</u>		RES. STATUS <u></u>		
HOME PHONE <u>425-335-3909</u>		CELL PHONE <u>(425) 870-9906</u>		PLACE OF EMPLOYMENT <u>YMCA</u>						
WORK PHONE <u>425-493-2416</u>		EMAIL ADDRESS <u>andy.katerossart@comcast.net</u>								

I, Kate Rossart, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was heading onto 20th when a car ran the red light and hit my car on the passenger side of the car in the back rear. I was stopped at the light and ~~when it~~ <sup>proceed</sup> to ~~turned~~ go through the intersection and was hit. It happened really fast.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>[Signature]</u>	DATE SIGNED <u>11/12/13</u>	LOCATION SIGNED <u>20th</u>
OFFICER/NUMBER: <u>C. Chiu #15</u>	DATE SIGNED <u>11/12/13</u>	LOCATION SIGNED <u></u>

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Incident History for: #SS13024927

Case Numbers: \$SS13002857

Entered 11/12/13 07:20:30 BY SPCT05 SP0141

Dispatched 11/12/13 07:20:56 BY SPDP17 SP0179

Enroute 11/12/13 07:20:56

Onscene 11/12/13 07:24:45

Closed 11/12/13 08:09:15

Initial Type: ACC Initial Alarm Level: Final Alarm Level:

Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H

Police BLK: SS003 Fire BLK: AG1318 Map Page: 397C-4 Group: SS1 Beat: SOUT

Src: T

Loc: 20 ST SE/83 AV SE ,LKS (V)

Loc Info: ON 20TH, WO

Name: ROSSART, KATE

Addr:

Phone: 4258709906

/0720 (SP0141) ENTRY ,CC 2 VEH NON-BLKNG, BLU DODGE MAGNUM & OTHER VE  
H POS LEFT OR TURNING AROUND....COMPACT PC ,POS  
SIL -POS HIT & RUN BUT RP THINKS THEY'RE DROPPIN  
G CHILD OFF @ SCHL & WILL RETURN

/0720 (SP0179) DISPER SS1931 #SS75 CHRISTENSEN, OFCR (CHAD)

/0724 (SS75 ) \*ONSCNE SS1931

/0733 (SP0179) MISC SS1931 ,NEXT TOW, RO REQUEST, DODGE MAGNUM SW. FLATBED

/0733 ROTREQ SS1931 TOW 5024 LKS ANGEL TRANSPORT & TOWING  
3605680918

/0734 MISC SS1931 ,ANGEL TOW

/0739 ASNCAS SS1931 \$SS13002857

/0740 (SS75 ) REMINQ SS1931 MDTVEH, ABV3475,,WA,,,,,,,,,,

/0742 REMINQ SS1931 MDTWANT, WEINERT, DEBORAH, K, 112556,,WA,,,,,,,,,,

/0809 (SP0179) CLEAR SS1931 D/H

/0809 CLOSE SS1931